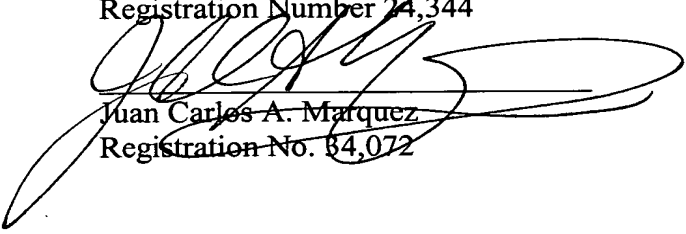


- [] Please charge my **Deposit Account Number** in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [] A check in the amount of \$ _____ to cover the fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

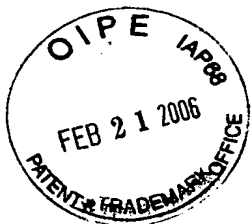
Respectfully submitted,

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February 21, 2006



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)	
)	
MIYAMOTO et al.)	Art Unit 2653
)	
Application Number: 10/766,206)	Examiner
)	Castro, Angel A.
Filed: January 29, 2004)	
)	
For: DISK ARRAY APPARATUS)	
)	
Attorney Docket No. ASAM.0105)	

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE AND AMENDMENT UNDER 37 C.F.R. § 1.111

Sir:

This is in response to the Office Action dated December 23, 2005, the period for response to which expires on March 23, 2006. Please amend the above-identified application as follows: